DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

OR

Declaration Submitted after Initial

Group Art Unit

Examiner Name

Filing (surcharge (37 CFR 1 16 (c)) required)

Declaration Submitted

Filing

with Initial

OCT 0 1 2007

Attorney Docket Number	MC085Y	
First Named Inventor	Bayly, et al	
С	OMPLETE IF KNOWN	
Application Number		
Filing Date		

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As a below named inventor	, I hereby declare t	that:					
My residence, mailing addre	ss, and citizenship a	are as state	d below next to my name				
I believe I am the original, fi names are listed below) of th							aral
CATHEPSIN CYSTEINE PR	OTEASE INHIBIT	ORS					
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the specification of which	•	•	Title of the Invention)				
bears the Attorney Doc	ket Number and Tit	le of the In	vention noted above				
OR							
is attached hereto OR							
was filed on (MM/DD/	YYYY)		as United States Applie	ation Number or PCT In	ternation	nal	
Application Number	an	nd was amo	ended on (MM/DD/YYYY)		(if app	licable).	
I hereby state that I have revi			ents of the above identified	specification, including	the clain	ns, as	
amended by any amendment	specifically referred	to above		·			
I acknowledge the duty to di							
as defined in 37 CFR 1 56, in the filing date of the prior ap							en
I hereby claim foreign priority				<u> </u>			ventor's
certificate(s), or 365(a) of any	PCT international	application	which designated at least	one country other than the	e United	l States o	of
America, listed below and have or of any PCT international appropriate to the control of the con						r's certif	icate(s),
Prior Foreign Application	pprication naving a r	ming date	Foreign Filing Date	I I I I I I I I I I I I I I I I I I I	anneu	Priority	Claimed?
Number(s)	Country		(MM/DD/YYYY)	Attorney Docket Nu	mber	YES	NO
Additional foreign applica	ition numbers are liste	d on a supp	lemental priority data sheet PI	O/SB/02B attached hereto			
I hereby claim the benefit under	35 U.S.C. 119(c) of a	ny United S	itates provisional application(s) listed below.			
Application Num	shor(s)		Filing Date (MM/DD/YYYY)	Attorney D	ačket N	lumber	
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DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

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Direct all co	rrespon	dence to: X	Custon	ner N	umber [000)21	0									
Name	Nicole	M. Beeler							•								
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City	Rahwa	у	Sta	tate NJ ZIP				07065-0907									
Country	USA		··-		Telepl	hone	(732):	594-11	077		Fax (732)594-4720						
I hereby deci belief are bel the like so m may jeopard	lieved to ade are	o be true; and punishable t	d further toy fine or	hat th impri	iese state isonment	ments t	were h, un	made der 18	with t	he kno	wic	edge that	willfi	ıl false	statem	nents and	
Name of Sole o	r First	Inventor:] A p	etitio	n has b	cen	n filed for	this	unsigno	d invo	entor	
	ven Na	ıme (first ar	nd middle	[if a	any])						Fa	mily Na	me o	r Surna	me		
Christopher				_	-		В	Bayly				γ					
Inventor's Signature			sty	2	\leq	5/	\leq				r	Date	17	Sez	zt.	2007	
Residence: City	Bead	consfield			State	Quebec		Cou	ntry	Canada	a		Citiz	enship	Can	adian	
Mailing Address		Merck Fros	st Canada	Lid,	16711	Trans-C	Canad	a High	way								
City		Kirkland, Q	uebec				S	tate		ZI	P	H9H 3L1		Cou	ntry	CANADA	
X Additional	invento	rs are being n	amed on th	e 2	supple	mental A	Additio	onal In	ventor	s(s) she	ct(s)) P1O/SB	/02A	or 02LR	attach	ed hereto	

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DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Addition				A petition has been filed for this unsigned inventor									
Give	n Na	ame (first and middle [i			Family Name or Surname								
Cameron				1	В	lack							
Inventor's Signature	(amen 7	6	<u> </u>	2	•			Date		est 1	3/07	
Residence: City	Bai	e d'Urfe	State	Quebec		Countr	уС	Canada		Citiz	zenship C	anadian	
Mailing Address		Merck Frosst Canada Ltd	1, 16711	Trans-Ca	anada	1 Highwa	iy						
City		Kirkland, Quebec		State	e		ZII	Р Н9Н	3L1	Country CANADA			
Name of Additional Joint Inventor, if any: Given Name (first and middle [if any])						A per	tition	has bed	en filed i	for this	unsigned i	nventor	
Give	any])					Fa	mily N	ame o	r Surname				
Sheldon		N			С	Crane							
Inventor's Signature		Holden Cr	,-L						Date	Su	F1 R	107	
Residence: City	Pier	теfonds	State		į	Countr	уС	anada		Citiz	enship C	onadian	
Mailing Address		Merck Frosst Canada Ltd	., 16711	Trans-Ca	ınada	Highwa	ıy						
City		Kirkland, Quebec		State		2	ZIP	н9н 3	LI		Country	CANADA	
		oint Inventor, if any:] A pet	ition	has bee	n filed i	or this	unsigned i	nventor	
	n Na	me (first and middle [if	алу]у	·				Fa	mily N	me o	r Surname		
Daniel J.		As m			М	icKay	·						
Inventor's Signature	/	1. M.	<u> </u>						Date	5,	of 18	7 2007	
Residence: City	Otta	iwa		Countr	уС	anada		Citiz	enship C	nadian			
Mailing Address		Merck Frosst Canada Ltd	, 16711	Trans-Ca	ınada	Highwa	у						
City		Kirkland, Quebec			Sta	te		ZIP H	9H 3L1		Country	CANADA	
		oint inventor, if any:				A pet	ition	has bee	n filed f	or this	unsigned in	ventor	
Give	n Na	me (first and middle [if	any]) Family Name or Surname										
Renata					01	balla							
Inventor's Signature		R-Onl)					Date	S	pt. 1	4,2007	L
Residence: City	Kirk	land	State	Quebec	[Countr	y C	anada		Citiz	enship Ca	nadian	
Mailing Address		Merck Frosst Canada Ltd	, 16711	Trans-Ca	nada	Highwa	у						
City		Kirkland, Quebec			Sta	te		ZIP	нэн .	3L1	Count	ry CANADA	

OCT 0 1 2007

DECLARATION AND POPULE ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Given Name (first and middle [if any]) Inventor's Signature Residence: City Mailing Address Merck Frosst Canada Ltd , 16711 Trans-Canada Highway City Kirkland, Quebec State State State State A petition has been filed for this unsigned inventor	
Inventor's Signature Residence: City Dollard des Ormeaux State Quebec Country Canada Citizenship Canadian Mailing Address Merck Frosst Canada Ltd., 16711 Trans-Canada Highway City Kirkland, Quebec State ZIP H9H 3L1 Country CAN	
Residence: City Dollard des Ormeaux State Quebec Country Canada Citizenship Canadian Mailing Address Merck Frosst Canada Ltd , 16711 Trans-Canada Highway City Kirkland, Quebec State ZIP H9H 3L1 Country CAN	
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City Kirkland, Quebec State ZIP H9H 3L1 Country CAN	ADA
	ADA
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Family Name or Surname	
Inventor's Signature Date	
Residence: City Country Citizenship	
Mailing Address	
City State ZIP Country	
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Inventor's Signature Date	
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Inventor's Signature Date	
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Mailing Address	
City State ZIP Country	